

2011 Military Health System Conference

VA and DoD Operating as One

Captain James A. Lovell Federal Health Care Center

The Quadruple Aim: Working Together, Achieving Success

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OBJECTIVES



- **Overview of Captain James A. Lovell Federal Health Care Center (FHCC)**
- **Challenges to success in combining processes, systems and people**
- **Lessons learned**
- **Questions**

FHCC MISSION & VISION



Mission

As the first integrated health-care federal facility, we are proud to provide comprehensive, compassionate, patient centered care to our veterans and DoD beneficiaries while maintaining the highest level of operational readiness.

Vision

Creating the future of federal healthcare through excellence in world-class patient care, customer service, education and research.

Values

Respect; Integrity; Trust; Accountability; Teamwork/Camaraderie

CAPTAIN JAMES A. LOVELL FHCC



- **First-of-its kind integration** between VA and DoD. FHCC includes:
 - **West Campus:** Former North Chicago VA Medical Center buildings, including the new MILCON funded ambulatory addition
 - **East Campus:** USS Osborne, USS Tranquility, USS Red Rover and Fisher Branch Medical Clinics
 - **Clinics:** Kenosha, McHenry and Evanston Community Based Outpatient Clinics



- * The present NCVAMC (West Campus)
- * The newly constructed Ambulatory Care Center (West Campus), replacing 12 story former Naval Hospital (200H)
- * The Navy Fleet Medicine Clinics (East Campus)
- * VA Community Based Outpatient Clinics

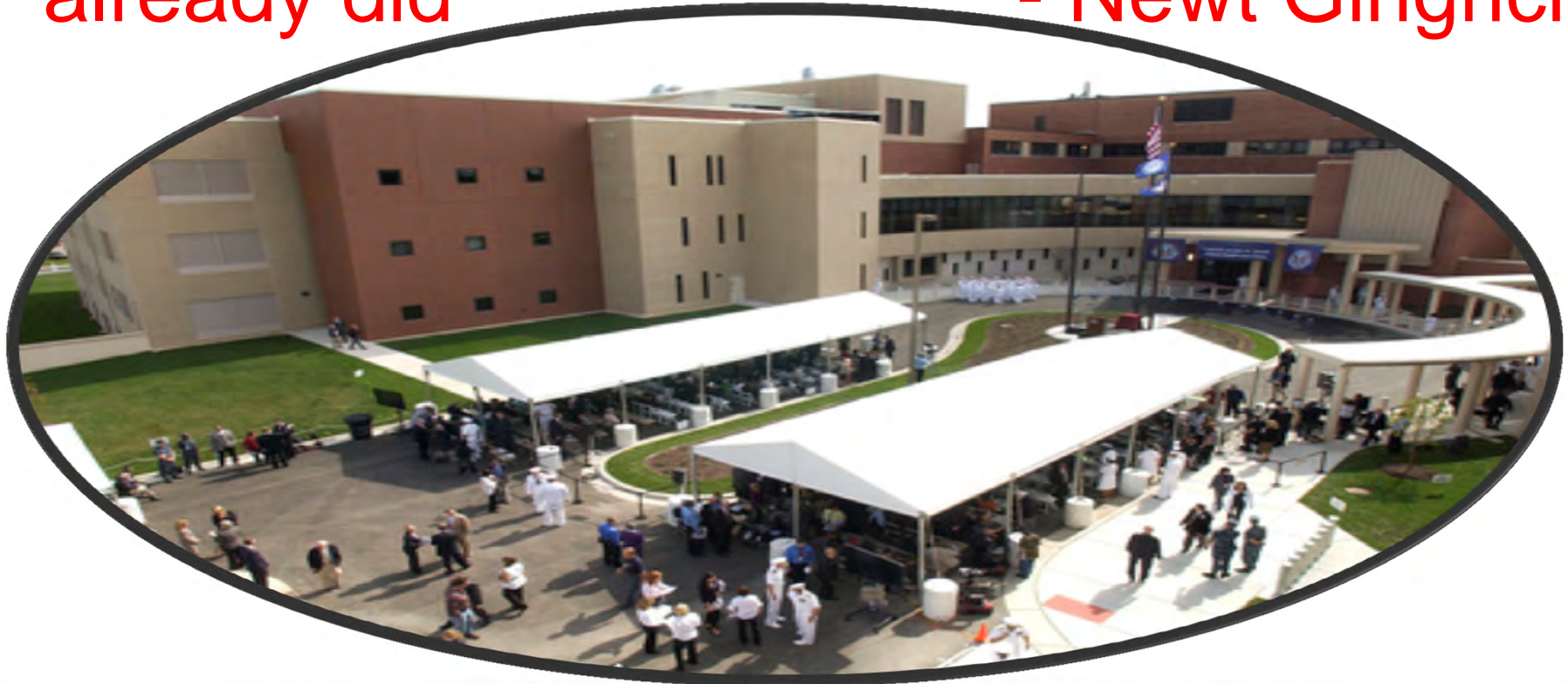
**Captain James A. Lovell
Federal Health Care Center
2010**





FHCC WASN'T BUILT IN A DAY

“Perseverance is the hard work you do after you get tired of doing the hard work you already did” - Newt Gingrich



Phase I

Sharing Relationship

October 2003

- Inpatient Mental Health transferred
- Reimbursement methodology:
 - As TRICARE Network Provider Status
- Local VA/DoD Working group chartered
- Multi-disciplinary

December 2004

- DoD Blood Donor Processing Center transferred
- Reimbursement methodology:
 - Navy leases VA laboratory space
 - VA purchases blood products
- Avoids \$3M construction cost to Taxpayer

Phase II

Network Relationship

January 2005

- \$13M NCVAMC Project
- Construction of 4 new OR's
 - Renovated 4 existing OR's
 - Expansion of existing Emergency Department

June 2006

- Transfer of inpatient med/surg/pediatric
 - Prof. svs. by Navy MD's for Surgery and Peds
- Transfer of operating room
- Transfer of ICU
- Transfer of ER service
- Reimbursement methodology:
 - Facility charges at TRICARE Network negotiated rate.

Phase III

Federal Health Care Center

FY2007

- Navy construction project began 2 JUL 2007:
- Surface parking (staff) completed DEC 2007

FY2008

- Parking Garage completed SEP 2008
- Renovated 45,000 square foot of existing NCVAMC spaces - completed SEP 2009.
- Begin 201,000 square foot ambulatory care center

Fall 2010

- Construction completed in SEPT 2010
- FHCC activated on 01 OCT 2010
- Clinics & Admin functions relocations completed by FEB 2011

FY04 - Women's Health & Mammography

FY05 – MRI, Oncology & Fiber Optic Connectivity

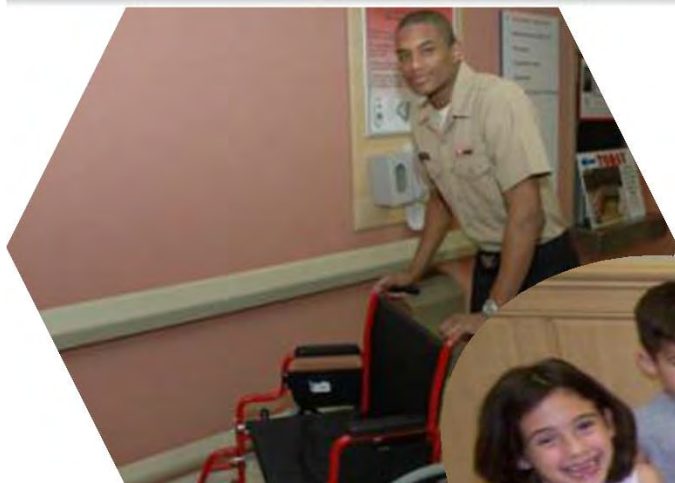
FY06 – Hospitalist & Digital Radiography (PACS)

FY07 – Project Management Support

FY08 – Enterprise IM/IT Requirements

FY09/10 – Enterprise IM/IT Development

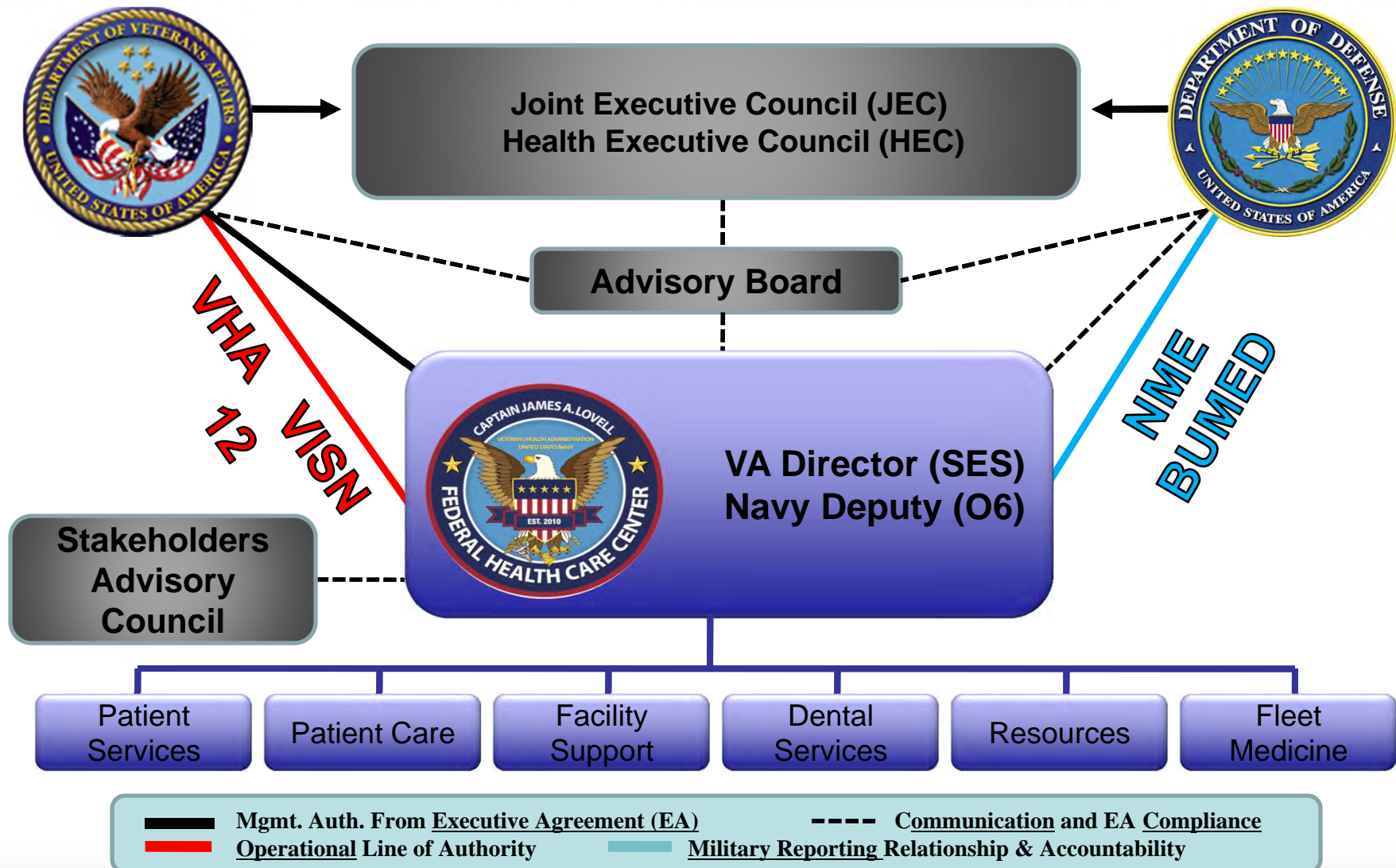
Captain James A. Lovell Federal Health Care Center



2011 MHS Conference



FHCC Reporting Structure



MHS QUADRUPLE AIM

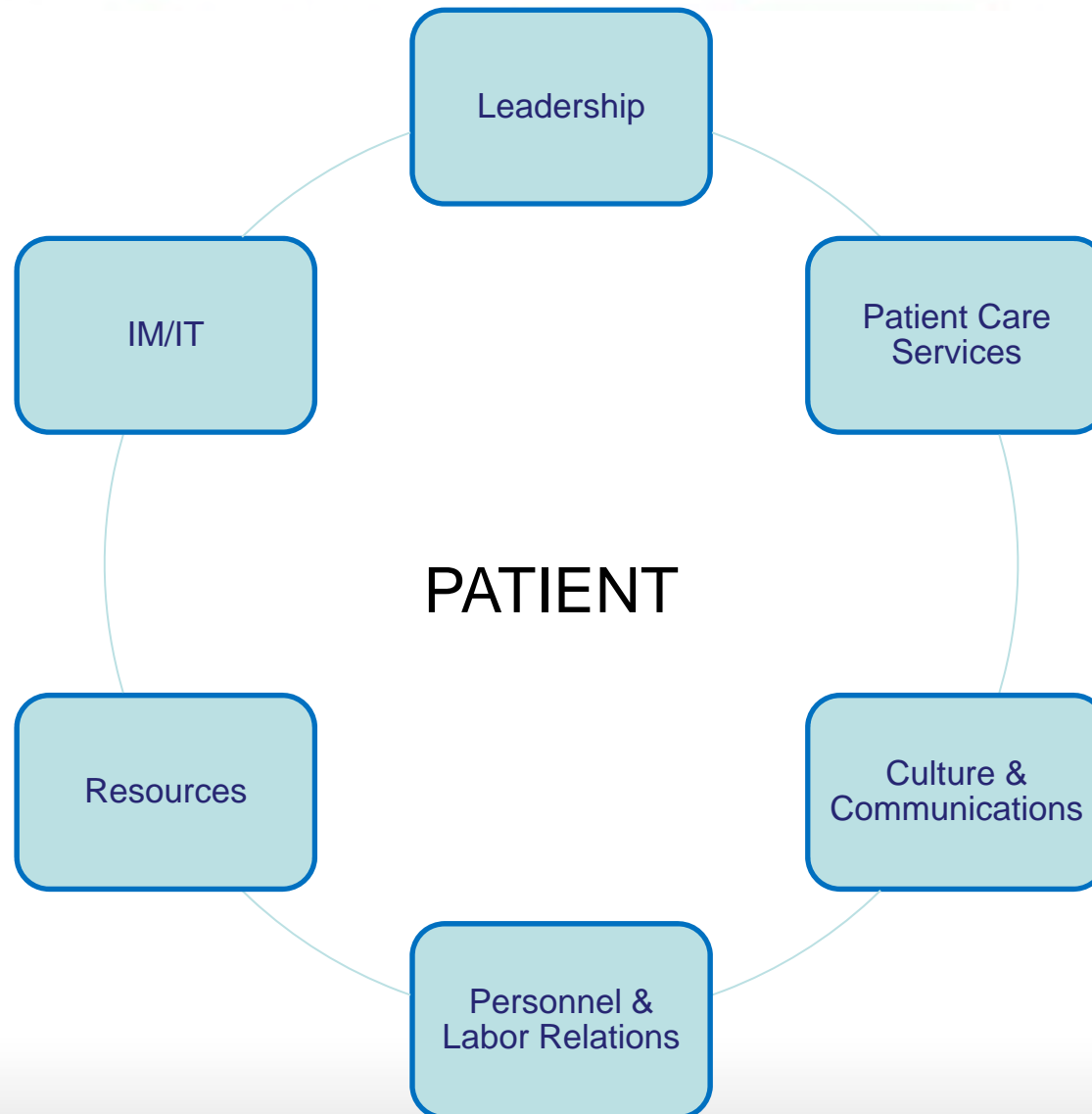


- **READINESS:** Operational Readiness, Training Opportunities for Corpsman and other medical professionals.
- **EXPERIENCE OF CARE:** The Right Care, at the Right Time and Place
- **POPULATION HEALTH:** Leveraging VA & DoD Computer Systems to Improve Outcomes
- **PER CAPITA COST:** Cost Synergies from Internal Economies of Scale.

CREATING A LEARNING ORGANIZATION:

An Ongoing Process of Continuous Improvement, Staff Engagement and Course Adjustment

MHS QUADRUPLE AIM



LEADERSHIP



- Early Establishment Of FHCC Leaders
- Deputy Director On Board Early
- Leadership Training (VA & DoD)
- Co-Location of Direct Reporting w CMD Suite
- Communication (Vertical & Horizontal)
- Executive Steering Committee (ESC)
- FHCC Advisory Board
- Role Definition
- Integration Teams
- Visibility (Town Halls, All Hands)
- Executive Sharing Agreement
- Mission, Vision & Values

PATIENT CARE/SERVICES



- Patient Safety #1
- Clinical Service Integration
- Communication to Beneficiaries
- Patient Priority
- Access To Care
- State Of The Art Equipment
- Corpsman Integration / IDC
- Integrated Policies
- Education and Research
- Synergies of Scale
- Product Line Recapture

CULTURE & COMMUNICATIONS



- Establishing Our Brand
 - Logo
 - Promise Kept: *Readying Warriors and Caring for Heroes*
- External Communication
 - Community Events
 - Speaking Engagements
 - Press Releases
 - Social Media



CULTURE & COMMUNICATIONS



- Internal Communication
 - Newsletter
 - Town Halls / Captain's Calls
 - Off-Site Retreats
 - Focus Groups & Surveys (NCOD / NPGS)



PERSONNEL & LABOR RELATIONS



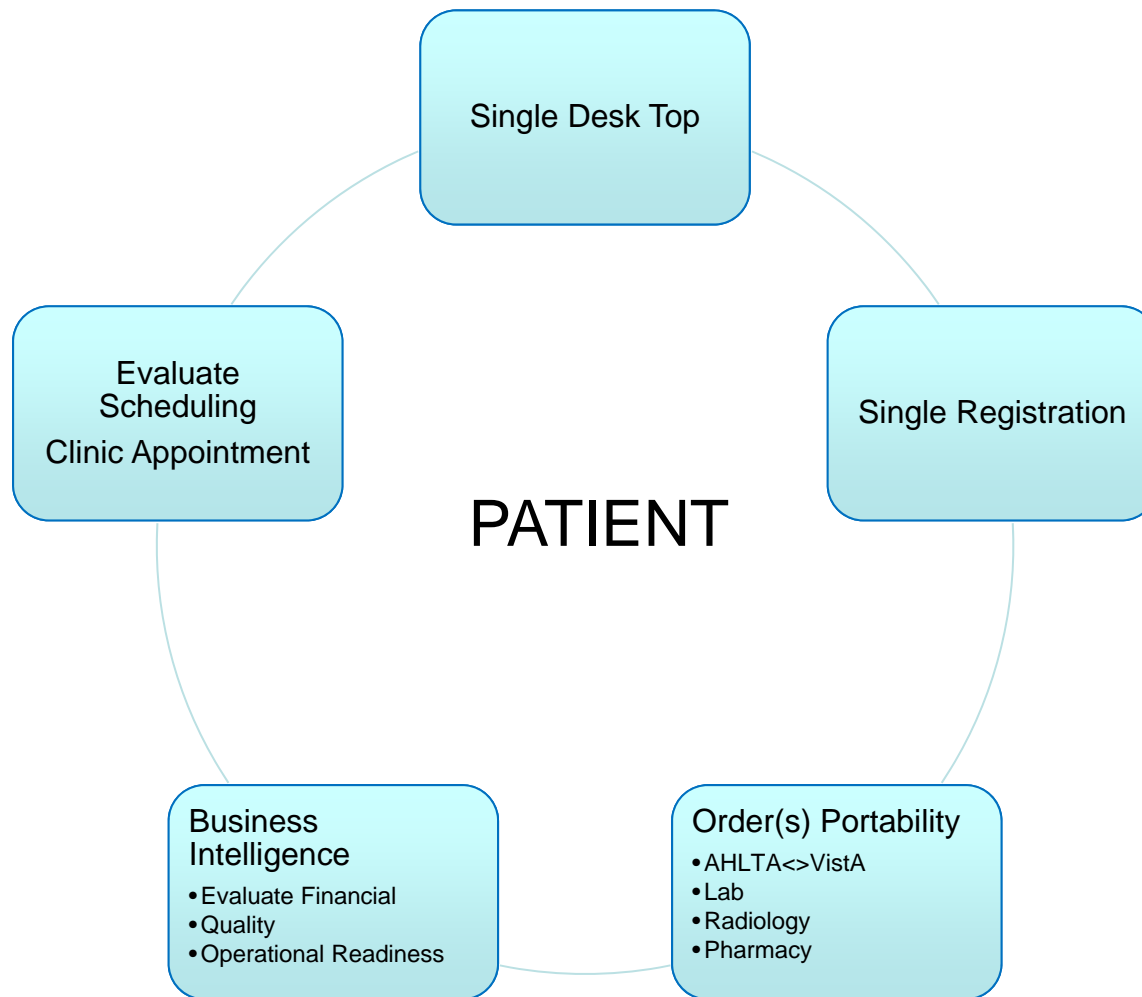
- Transfer Of Function
- Military / Civilian
- Combining Labor Unions
- Labor Partnership
- Position Descriptions
- Education & Training (LMS/NKO)
- New Organization Structure
- Total Work Force Management

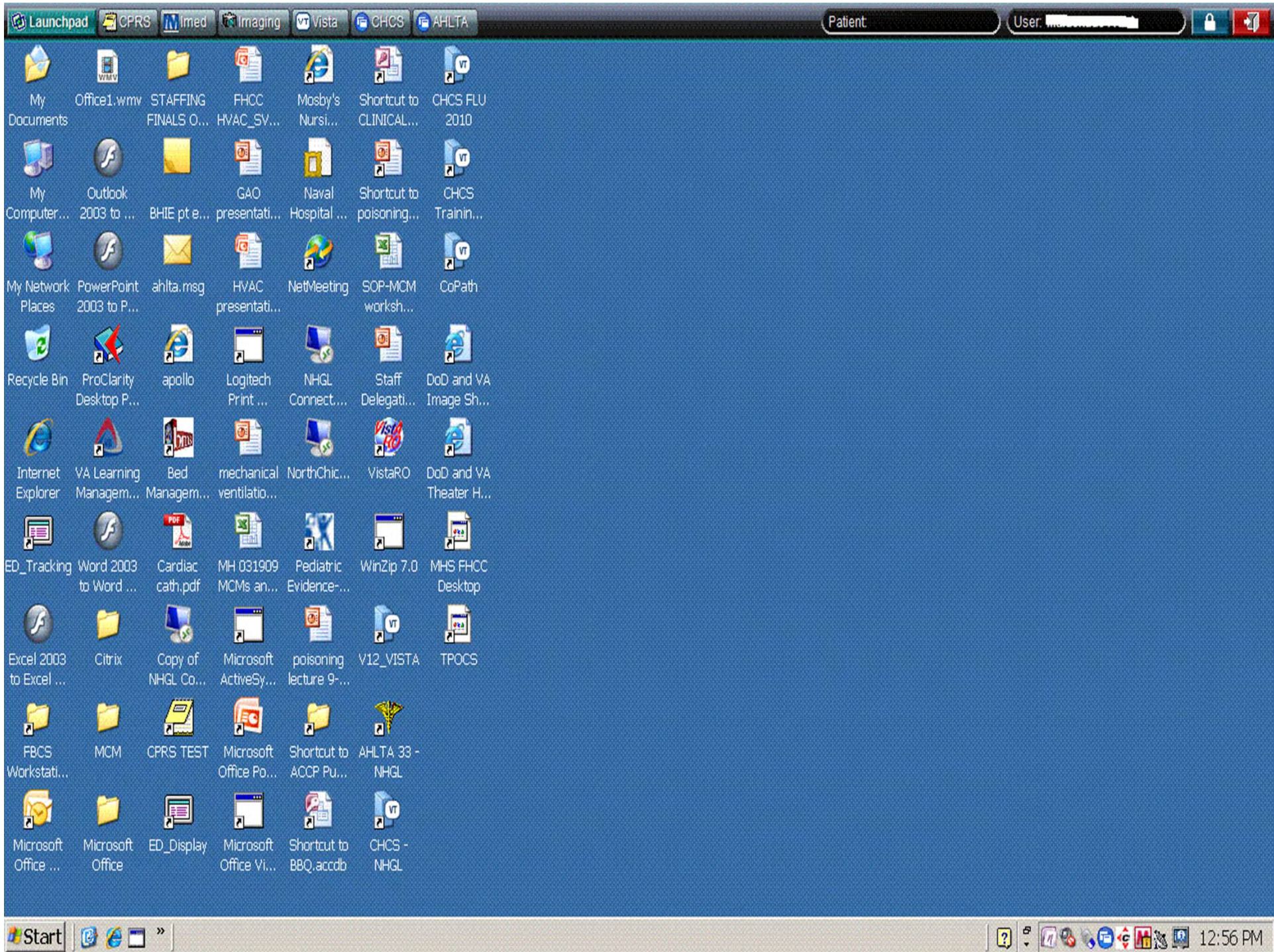
RESOURCES



- Budget - Joint Medical Facility Demonstration Fund (JMFDF)
- Reconciliation
- Continuing Resolution Authority (CRA)
- Supply Chain
- Contract Issues
- Construction

INFORMATION MANAGEMENT INFORMATION TECHNOLOGY





Launchpad CPRS Med Imaging Vt Vista CHCS AHLTA

133-4DM B120-4B Primary Vistaweb Postings
Nov 17, 2011 Provider: MALDONADO, FRANK MD Attend Flag Remote Data D

Sort by Status/Exp. Date (IMO first on Inpt)

Action	Inpatient Medications	Stop Date	Status	Location
	*ACETAMINOPHEN TAB Give: 650MG PO Q6H PRN for pain/fever. do NOT exceed 4000mg acetaminophen/24h all sources	02/13/11	Active	
	in SODIUM CHLORIDE 0.9% 1000 ML IV 100 ml/hr@0	01/12/11	Discontinued	

Action	Non-VA Medications	Start Date	Status
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Action	Outpatient Medications	Expires	Status	Last Filled	Ref...
	MAGNESIUM OXIDE 420MG TAB Qty: 2 for 1 days Sig: TAKE TWO TABLETS BY MOUTH ONCE FOR MAGNESIUM SUPPLEMENT FROM ED PYXIS	02/11/11	Discontinued	Jan 12,11	0
	ACETAMINOPHEN 500MG TAB Qty: 2 for 1 days Sig: TAKE TWO TABLETS BY MOUTH NOW PAIN/FEVER, MAX 4000MG ALL SOURCES ADMINISTERED FROM ED PYXIS	02/11/11	Discontinued	Jan 13,11	0

Cover Sheet Problems Meds Orders Notes Consults Surgery D/C Summ Labs Reports

Folder List

- Desktop
- Notifications (2)
- Appointments
- Telephone Con
- Search
- New Results (1)
- Tasking
- Co-signs
- Sign Orders
- Consult Log
- Patient List
- CHCS-I
- EWSR
- Reports
- Tools
- Web Browser
- AHLTA Links
- Demographics
- Health History
- Problems
- Meds
- Allergy
- Wellness
- Immunization
- Vital Signs
- PKC Couple
- Readiness
- Patient Que
- DoD/VA/Th
- OB Summar
- Lab
- Radiology

Search Filter: Outpatient Curr The medication list should be validated with patients for their safety.

Origin	Medication Name	Sig
DoD	ACETAMINOPHEN, 325 MG, TABLET, ORAL	TAKE 1 TABLET PO EVERY 6 HOI
DoD	Cetylpyridinium Chloride + Benzocaine + Menti	DISSOLVE 1 LOZENGE IN MOUTH
DoD	Phenol 1.4%, Spray, Mouth or throat	SPRAY AS NEEDED FOR SORE T
DoD	Cetirizine Hydrochloride 5mg + Pseudoephedri	T 1 TB PO BID PRN ALLERGIES #:
DoD	Carbamide Peroxide 6.5%, Solution, Otic	USE 3 DROPS IN AFFECTED EAR
DoD	NAPROXEN, 500 MG, TABLET, ORAL	TAKE ONE TABLET PO TWICE A I
DoD	Etonogestrel 68mg, (Implanon), Implant, Injection	HAVE INSERTED AT BLDG 1523
DoD	IBUPROFEN, 800 MG, TABLET, ORAL	T 1 TAB PO TID PRN FOR PAIN #
DoD	IBUPROFEN, 800 MG, TABLET, ORAL	T 1 TAB PO TID PRN FOR PAIN R
DoD	ASCORBIC ACID, 500 MG, TABLET, ORAL	T1 TAB PO DAILY
DoD	FERROUS SULFATE, 325(65) MG, TABLET, ORAL	TD PO
DoD	Pharmacy Intervention: Miscellaneous Not Sp	NO MEDS/SHIP 5
DoD	FERROUS SULFATE, 325(65) MG, TABLET, C	TAKE 1 TABLET PO DAILY #30 F
DoD	IBUPROFEN, 200 MG, TABLET, ORAL	T 1-2 TABS PO Q4-6H AS NEEDED
DoD	ACETAMINOPHEN, 325 MG, TABLET, ORAL	TAKE 1 TABLET PO EVERY 6 HOI
DoD	BISMUTH SUBSALICYLATE, 262 MG, TAB C	CHEW 2 TABLETS EVERY HOUR
DoD	Guaifenesin/Dextromethorphan Hydrobromide	U UD #1 RFO
DoD	Menthol + Cetylpyridinium Chloride, Lozenge, I	USE AS DIRECTED FOR COUGH I
DoD	ACETAMINOPHEN, 325 MG, TABLET, ORAL	TAKE 1-2 TABS EVERY 4-6 HOUR
DoD	BISMUTH SUBSALICYLATE, 262 MG, TAB C	CHEW 2 TABS EVERY 1/2 HOUR
DoD	Menthol + Cetylpyridinium Chloride, Lozenge, I	DISSOLVE 1 TAB IN MOUTH AS N
DoD	CALCIUM CARBONATE/VITAMIN D2, 500 MG-200, T, T	T 1 TB PO BID #60 RF3
DoD	Penicillin G Benzathine 600000U/mL, Suspen:	1.2 MU BY IM #1 RFO

OTC is an over-the-counter

CHCS Connection: Ready

Start CPRS - Patient ... 1:17 PM

Launchpad CPRS MImed Imaging VT Vista CHCS AHLTA

Vista CPRS in use by: [redacted] (vista.n-chicago.med.v...

File Edit View Action Tools Help

133-4DM B120-4B
Provider: [redacted] Flag VistaWeb Remote Data Postings D

Sort by Status/Exp. Date (IMD first on Inpt)

Action	Inpatient Medications	Stop Date	Status	Location
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Cover Sheet Problems Meds Orders Notes Consults Surgery D/C Summ Labs Reports

Start [Taskbar Icons] CPRS - Patien... sentillion cpsr-a... chcs - Reflection...

chcs - Reflection for UNIX and OpenVMS - Vergence Patient Link On

File Edit Connection Setup Macro Window Help

Macro1

AGE: [redacted]

- Z-ETONOGESTREL (IMPLANON) 68MG SUBQ IMPLA HAVE INSERTED AT BLDG 1523
RR: 0 #: 1
- CARBAMIDE PEROXIDE 6.5% OTIC DROPS USE 3 DROPS IN AFFECTED
EAR(S) TWICE A DAY FOR 3 DAYS RR: 2 #: 15
- FERROUS SULFATE (IRON) 325MG TAB TAKE ONE TABLET EVERY DAY BY
MOUTH RR: 2 #: 90
- NAPROXEN 500MG ORAL TAB TAKE ONE TABLET BY MOUTH
TWICE A DAY WITH FOOD RR: 1 #: 30
- OYS SHL CALCIUM 500MG + VIT D 200IU TAKE ONE TABLET BY MOUTH
TWICE A DAY RR: 2 #: 60
- ASCORBIC ACID (VIT C) 500MG ORAL TAB TAKE ONE TABLET BY MOUTH

332, 1 VT500-7 -- 214.2.22.170 via SECURE SHELL 1:25 PM

LESSONS LEARNED



- Maintain Focus On The Vision
- Buy -In From All Levels Of Both Organizations Critical
- Everyone Will Function As “One Team” Focused On the Mission (Healthcare and Readiness).
- Use Lessons Learned From Other VA/DoD Efforts.
- Focus On Collaboration, Not Control
- What Is Crafted For FHCC Should Be Exportable To other VA/DoD Efforts.
- Use System Thinking Not Linear Thinking
- Plan For Future Reality
- Cheerful Persistence

LESSONS LEARNED



- Dedicate Resources (Funds / Staff) Early
- Get HQ Engaged Early
- Get Legal Engaged Early
- Remember Murphy's Law
- Expect To Be Under A Microscope
- Mitigate Risks
- Complexity of Legal Process
- Be Willing to Take Risks
- Have A Backup Plan. Be Flexible
- Measures of Success
- Executive Sharing Agreement

QUESTIONS?

Readying Warriors

and

Caring for Heroes

